



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

TESTIMONY PRESENTED BEFORE THE PUBLIC HEALTH COMMITTEE FEBRUARY 20, 2013

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Senate Bill 189 - An Act Concerning Elective Angioplasty For Certain Patients

The Department of Public Health opposes Senate Bill 189

This Bill would allow a hospital which is already approved to perform emergency angioplasty, but not elective angioplasty, to perform elective angioplasty on patients who undergo emergency angioplasty and may require, in the opinion of the physician, elective angioplasty in the near future. Performance of angioplasty in CT requires certificate of need approval. The Certificate of Need program administered by the Office of Health Care Access regulates the establishment of cardiac services, including inpatient and outpatient cardiac catheterization, interventional cardiology and cardiovascular surgery. OHCA has regulated these cardiac services for many years to prevent duplication and over-utilization of services which increases costs to the overall health care system. OHCA utilizes its guidelines and principles and clearly defined statutory process in the regulation of these services. The CON program conforms to professional clinical guidelines which are also contained in the department's Statewide Health Care Facilities and Services Plan.

Currently, Connecticut hospitals seeking authorization to initiate an elective angioplasty program without on-site cardiac surgery capabilities are encouraged in the Statewide Health Care Facilities and Services Plan to meet the conditions required in the national ACCF/AHA/SCAI Practice Guideline and to demonstrate clear public need for the program. The guideline states that it is only appropriate to consider initiation of an angioplasty program without on-site backup if the program will clearly fill a void in the healthcare needs of the community. Further, the guideline notes that competition with another angioplasty program in the same geographic area may not be in the best interests of the community. The guideline also emphasizes that such programs adhere to rigorous clinical programmatic requirements and angiographic criteria for proper patient selection.

The national guideline is intended to assist healthcare providers in clinical decision making and provide generally accepted approaches to the diagnosis, management, and prevention of specific diseases or conditions. It is not OHCA's practice to regulate clinical decision-making. The ultimate judgment regarding care of a particular patient should be made by the healthcare provider and patient.

Thank you for your consideration of the Department's views on this bill.

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